



14. (New) The visual decision tree device of claim 13 wherein the card comprises markers corresponding to a defined scale for classifying the wound or patient.

15. (New) The visual decision tree device of claim 14 wherein one or more cards shows a visual decision tree and wherein the housing comprises a view window through which one or more visual decision trees corresponding to the wound classification can be viewed.

REMARKS

This amendment is being filed in response to the Official Action mailed in this application on July 11, 2002. By this amendment, claims 11 and 12 have been canceled, and new claims 13-15 have been added. Accordingly, claims 1-10 and 13-15 are now pending in this application. Reconsideration of this application is respectfully requested in view of the above amendments and further in view of the following remarks.

Turning to the action, claim 11 was rejected under 35 USC §112, second paragraph, since there was insufficient antecedent basis in the claim for the expression "the sliding card". Applicant has canceled claims 11 and 12, and added claims 13-15. Applicant believes these amendments overcome the rejection, and applicant requests that the rejection be withdrawn.

Next, claims 1-12 were rejected under 35 USC §103 as being unpatentable over US Patent No. 5,299,121 ("Brill et al.") in view of "Solutions™ Wound Care Algorithm Series" ("Solutions™"). Applicant respectfully traverses this rejection.

According to the action, Brill et al. teach "a method for identifying a symptom care protocol for a given symptom", "(C)lassifying the symptom against a defined scale for a first symptom factor to obtain a symptom classification", "grading the symptom factors against defined scale" and "a visual decision device corresponding to the symptom classification wherein the visual decision device identifies at least one component of a treatment protocol for the graded symptom factors". Clearly, this is a *very* generous reading of Brill et al. and uses the language of the instant application to over extend what is *actually* in Brill et al.

Then, it *is* recognized in the action that Brill et al. has absolutely nothing whatsoever to do with wound care. To remedy that, the action relies on *Solutions™* to overcome this deficiency. Of course, to do so, the rejection must again use the instant application as a guide and relies on impermissible hindsight to conclude that the claims are obvious over the combination of Brill et al. and *Solutions™*.